

Request for Appropriation Budget Template

Enter data into each yellow cell.

Request Title:	Rate increase for case managers at area agencies on aging
Sponsor:	Raymond Ward

Step 1. Revenue			
		Funding Source	
Amount Requested	\$ 648,000.00	General Fund	
Other Revenue Sources			
Total Revenues:	\$ 648,000.00		
Difference between Revenue & Expenditures			\$ -
Step 2. Expenditures			
Amounts		Details	
Personnel		Number of personnel supported:	
Travel		Nature of travel:	
Equipment/Supplies		Types of equipment/supplies to be purchased:	
Pass-through		Intended recipient(s) of pass-through funds:	
Licenses		Description of licenses (number, cost per license, etc.)	
Other	\$ 584,000.00	Description of other expenses	Increase the rate per unit of case management from \$20.00 per unit up to \$25.39 per unit for all case management services provided through the state Medicaid New Choices Waiver. The current rate has not changed since 2008.
Other	\$ 64,000.00	Description of other expenses	Increase the rate per unit of case management from \$20.81 per unit up to \$26.42 per unit for all case management services provided through the state Medicaid Aging Waiver. The current rate has not changed since 2008.
Other		Description of other expenses	
Total Expenditures:	\$ 648,000.00		